Approved for use through 11/30/2005. OMB 0651-0035

U.S. Patent and Trademark Office: US DEPARTMENT OF COMMERCE

PCT/EP2004/013499

Judith Bramel DEELY

25 November 2004

NOVEL USE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

Application Number

First Named Inventor

Filing Date

Title

Art Unit

POWER OF ATTORNEY

INDICATION FORM

and CORRESPONDENCE ADDRESS

Examiner N	ame	
Attorney Do	cket Number	PB60596
I hereby appoint:		
☐ Practitioners associated with the Customer Numbers. 23347		
Or		
☐ Practitioner(s) named below:		
Name		Registration Number
As my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the		
United States Patent and Trademark Office connected therewith		
Please recognize or change the correspondence address for the above-identified application to:		
The address associated with the above-mentioned Customer Number:		
Or The state of th		
☐ The address associated with Customer Number 23347		
Or		
☐ Firm or Individual Name:		
Address:		
Address:		
City:	State:	Zip:
Country:		
Telephone:	Fax:	
I am the:		
Applicant/Inventor:		
Assignee or record of the entire interest. See 37 CFR 3.71.		
Statement mater 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)		
Signature:		
Name: Peter John GIDDINGS		14 20 8047 4414
Title and Company: Attorney and Authorised Official, SmithKline Beecham Corporation		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required.		

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CRF 1.14. This collection is essential to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commission for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Submit multiple forms if more than one signature is required, see below*

forms are submitted.

□ *Total of:

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.